

PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/692,734	
	Filing Date	October 27, 2003	
	First Named Inventor	Gerhard JAEHNE et al.	
	Art Unit		
	Examiner Name		
Total Number of Pages in This Submission	3	Attorney Docket Number	DEAV2001/0052 US NP 1

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 2px;"> Change of Correspondence Address; Fee Address Indication Form </div>
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	AVENTIS PHARMACEUTICALS INC.		
Signature	<i>Barbara E. Kury</i>		
Printed name	Barbara E. Kury		
Date	4/18/05	Reg. No.	34,650

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: (USPTO FAX NO. 703-872-9306 Total No. of Pages Transmitted: 3)		
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PTO/SB/123 (09-04)

Approved for use through 11/30/2005. OMB 0651-0035

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Patent Number	6,812,256
Issue Date	November 02, 2004
Application Number	10/692,734
Filing Date	October 27, 2003
First Named Inventor	Gerhard JAEHNE et al.
Attorney Docket Number	DEAV2001/0052 US NP 1

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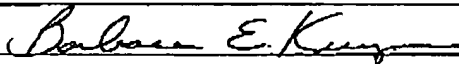


Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).



Attorney or agent of record. Registration Number 34,650

Signature



Typed or

Printed Name

Barbara E. Kurys

Date

4/18/05

Telephone

908-231-2965

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



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PTO/SB/47 (09-04)

Approved for use through 05/31/2006. OMB 0551-0016

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Request for Customer Number (PTO/SB/125) attached hereto
in the following listed application(s) for which the Issue Fee has been paid for patent(s).

PATENT NUMBER (if known)	APPLICATION NUMBER
6,812,256	10/692,734

Completed by (check one):



Applicant/Inventor


Signature



Attorney or Agent of record 34,650
(Reg. No.)

Barbara E. Kurys

Typed or printed name



Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96)

908-231-2965

Requester's telephone number

Assignee recorded at Reel 013875 Frame 0758

4/18/05
Date

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